

- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	39	MINUS	* 40	0
INDEP	4	MINUS	** 4	0
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			

* not fewer than 20

** not fewer than 3

SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 25	\$
X	\$ 100	\$
+	\$ 180	\$

TOTAL= \$ 0OTHER THAN
SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 50	\$
X	\$ 200	\$
+	\$ 360	\$

TOTAL= \$ 0**The Application Size Fee has been calculated as shown below:***(Effective for cases filed on or after December 8, 2004)*

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)

SMALL ENTITY

Rate	Total Amount Owed
X \$125	\$[]

OTHER THAN
SMALL ENTITY

Rate	Total Amount Owed
X \$250	\$[]

Payment Sufficient for up to
[] Sheets

Petition for Extension of Time

[] Applicant hereby petitions to extend the time to respond to the [] dated [] for [] month(s) from [] to []. The appropriate fee is set forth below.

[] [For action-specific language in an extension of time, go to insert, file, public folders, firm templates, and select the appropriate paragraph.]

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	
	_____	\$ _____
	_____	\$ _____
	TOTAL:	\$ <u>0</u>

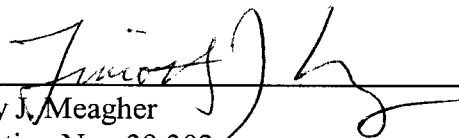
A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	
	_____	\$ _____
	_____	\$ _____
	TOTAL:	\$ <u>0</u>

☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By 
 Timothy J. Meagher
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Dated: 8/18/6